



Navy Drug Detection and Deterrence News

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Messages to Share

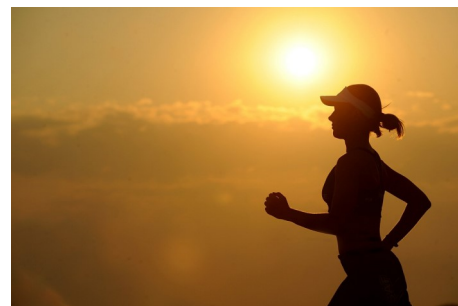
Below are sample messages that can be shared on social media or as Plan of the Week notes aligned with Navy Drug Detection and Deterrence's prevention efforts:

1. Taking the necessary steps to improve health and prevent chronic illness can be challenging. August is the Navy and Marine Corps Public Health Center's Preventive Health Month. Find the toolbox to learn about healthy practices you can implement in your daily life at go.usa.gov/xyrvG.
2. CBD products are everywhere, and sellers make several claims about their benefits. Many of those benefits are not studied or proven. By trying out these products to see if they work for you, you're taking a chance and risking your career. Navy's policy regarding CBD products and all other cannabinoids is still zero-tolerance.
3. When it comes to substances, the law that applies to civilians does not always apply to Sailors. If illicit substances like marijuana or psychedelics are decriminalized or legalized in a city or state where you are stationed or visiting, the Navy's policy on substance use still applies to you, no matter what.
4. While cleaning the house for visiting friends and family, take some time to clean your medicine cabinet and get rid of old and expired medications. Mix them in a small plastic bag with used coffee grounds or kitty litter and throw away, or take them to a safe and secure drop box at a military treatment facility or pharmacy.

For help with a substance or alcohol use issue, contact your local DAPA, or call 1-866-U-ASK-NPC.

Adopting Healthy Habits for Prevention

Most of us would not think of driving our cars until the brakes fail, a belt snaps, or the engine wears out from abrasive particles in the oil that was never changed. We routinely perform maintenance, check fluids and rotate tires. That's a part of car ownership. It may feel like an inconvenience sometimes, but it would be much more inconvenient to be stranded on the side of the highway.



Still, many Americans, particularly men, only visit a doctor when there is a concerning symptom. People decide to start eating healthy when their cholesterol levels rise or begin an exercise routine after their blood pressure is elevated.

Understanding the Habit Loop

How can we adopt healthy habits for preventive health care? Researchers from the [Massachusetts Institute of Technology](#) have identified a "loop" that occurs in the brain for virtually every habit we as humans have: a cue, the routine (or activity) and a reward. Most cues fall into one of the following categories: location, time, emotional state, other people, or the action immediately preceding the urge. Whether trying to adopt good habits or change bad ones, success rests on identifying the cue and the reward.

Adopting Healthy Habits for Prevention

Imagine that you want to stop habitually eating a donut every day. It is important to first figure out the cue. If the urge to eat the donut comes at mid-morning and the other categories vary, then time might be the cue. Next, try to identify the reward. Is it distraction from work or a satiation from hunger? If it is the former, taking a short walk at mid-morning can replace the donut. If truly hungry, try keeping healthier snack options nearby and reaching for those instead. You could even try these steps with smoking or some drinking habits.

Adopting new habits like regular exercise may be easier if scheduled at a certain time each day, following a consistent cue and finishing with a reward. For example, take a walk around the block after dinner each evening, and treat yourself to a cool shower or relaxing activity you enjoy afterwards.

Try writing out a plan to implement a new habit following this format: "When this cue happens, I will do this healthy activity because I will get this reward." Post it in a visible spot and commit to it for a week. When it becomes routine, you will have a new healthy habit that supports preventive health. If you have concerns and feel you may need additional help changing your habits related to alcohol or other substance use, contact your local DAPA.



Navy Drug Detection and Deterrence News

Substances and Breastfeeding

August is National Breastfeeding Month. The American Academy of Pediatrics recommends exclusive breastfeeding for an infant's first six months. Breast milk is immunity-boosting and cost-effective and digests more easily than formula. It is also associated with allergy protection, lowered risk of sudden infant death syndrome (SIDS) and even a reduction in obesity later in life.

Almost any drug present in the bloodstream will pass into breast milk, and some can build up concentration. A full-term newborn has about a third the metabolic capacity as an adult while a premature infant has only 5-10%; therefore, substances affect infants several times longer than adults.

Even some common medications like aspirin should be avoided, but Tylenol is safe. Cimetidine (an acid suppressant found in Tagamet); certain cardiovascular drugs such as amiodarone, atenolol, and nadolol; tetracyclines and sedatives such as diazepam (Valium) should be avoided. Most antibiotics have low transfer to breast milk, but may alter bowel flora in infants.

Additionally, it is recommended to avoid breastfeeding for two hours after one standard alcoholic drink. Caffeine use may cause irritability and restlessness in infants. Women trying to quit smoking can breastfeed before smoking, then "pump and dump" up to three hours after. The effects of e-cigarettes and vape pens on breastmilk have not been extensively studied, but they do contain high levels of nicotine and carcinogens. Cannabidiol (CBD) has been detected in breast milk, but long-term effects on infants are not known. It's best to avoid them and other cannabinoids.

Breastfeeding is the "gold standard" for infant nutrition. Safer medications can be used or habits adjusted to minimize infant exposure to substances. Always ask a physician about drug or supplement safety while breastfeeding or find information on the National Institutes of Health's LactMed database at toxnet.nlm.nih.gov.



Current and Upcoming Events

August DDD Webinars

All webinars are scheduled for 1000-1130 CT and 1700-1830 CT

14 — Web DTP & DTP Lite 6.0 (Demo)

28 — Web DTP & DTP Lite 6.0 Continued (Demo)

To join, log on at go.usa.gov/xPPS2.

ADAMS for Leaders, DAPA, UPC & Drug Aware Courses

Can be accessed using your CAC by logging in to My Navy Portal (MNP) at my.navy.mil.

NMCPHC Preventive Health Month

August

Find the toolbox at go.usa.gov/xyrvG.

Suicide Prevention Month

September

Suicide Prevention is an All Hands issue. Find resources to strengthen your local efforts ahead of Suicide Prevention Month. Visit

www.suicide.navy.mil.

FDA Warnings on Kratom

The Food and Drug Administration has recently issued warnings to companies making unproven claims about kratom. The companies claim that the substance can treat or cure opioid addiction and withdrawal symptoms, as well as other health conditions such as cancer, depression and anxiety.

Kratom has been linked to overdose deaths, and the FDA continues to warn consumers not to use the plant which grows naturally in Thailand, Malaysia, Indonesia and Papua New Guinea. Kratom is not legally marketed in the United States as a drug or dietary supplement and has no FDA-approved uses. Current data suggest that certain substances in kratom have opioid-like properties that cause potential risk of addiction and dependence. The FDA has received concerning reports about the safety of kratom. The agency is actively evaluating available scientific information, but it continues to warn consumers not to use any kratom products or those containing its psychoactive compounds, mitragynine and 7-hydroxymitragynine.

The FDA encourages more research to better understand kratom's safety profile, including the use of kratom combined with other drugs.